

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

1-800-325-8506

PERSONAL FINANCIAL STATEMENT**FORM PFS
COVER SHEET**

Filed in accordance with Government Code Chapter 572.
 For filings required in 2003, covering calendar year ending December 31, 2002.
 Use FORM PFS--INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED:

Account #

20990

| | | | |
|--------------------|--|-------------------------|--|
| 1 NAME | TITLE, FIRST MI Royce NICKNAME, LAST, SUFFIX West | | OFFICE USE ONLY |
| 2 ADDRESS | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 320 S. R. L. Thornton Freeway Suite 300 Dallas, TX 75203 | | Date Received RECEIVED JUL 18 2003 Texas Ethics Commission |
| 3 TELEPHONE NUMBER | AREA CODE | PHONE NUMBER; EXTENSION | Receipt # 7-15-03 100-2 PROCESSED JUL 18 2003 Date Imaged |

| | |
|-------------------------------|--|
| 4 REASON FOR FILING STATEMENT | <input type="checkbox"/> CANDIDATE _____ (INDICATE OFFICE) <input checked="" type="checkbox"/> ELECTED OFFICER _____ (INDICATE OFFICE) <input checked="" type="checkbox"/> APPOINTED OFFICER _____ (INDICATE AGENCY) <input type="checkbox"/> EXECUTIVE HEAD _____ (INDICATE AGENCY) <input type="checkbox"/> FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT <input type="checkbox"/> STATE PARTY CHAIR _____ (INDICATE PARTY) <input type="checkbox"/> OTHER _____ (INDICATE POSITION) |
|-------------------------------|--|

| |
|--|
| 5 Family members whose financial activity you are reporting (filer must report information about the financial activity of the filer's spouse or dependent children if the filer had actual control over that activity): |
| n/a |
| <input type="checkbox"/> SPOUSE _____ |
| <input type="checkbox"/> DEPENDENT CHILD 1. _____ |
| 2. _____ |
| 3. _____ |

In Parts 1 through 15, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 10, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child if you had actual control over that person's financial activity.

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

SOURCES OF OCCUPATIONAL INCOME**PART 1A**

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|--|---|
| 1 INFORMATION RELATES TO | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| 2 EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED | NAME AND ADDRESS OF EMPLOYER / POSITION HELD Robinson, West & Gooden, P.C. 400 South Zang, Suite 600 Dallas, TX 75203 |
| | NATURE OF OCCUPATION |
| INFORMATION RELATES TO | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED | NAME AND ADDRESS OF EMPLOYER / POSITION HELD West & Gooden, P.C. 400 North St. Paul Suite 1140 Dallas, TX 75202 |
| | NATURE OF OCCUPATION |
| INFORMATION RELATES TO | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| EMPLOYMENT <input checked="" type="checkbox"/> EMPLOYED BY ANOTHER <input type="checkbox"/> SELF-EMPLOYED | NAME AND ADDRESS OF EMPLOYER / POSITION HELD State of Texas State Capitol 1400 Congress Avenue, Room 1E, 15 Austin, TX 78701 |
| | NATURE OF OCCUPATION |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | |

RETAINERS**PART 1B**

This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a "substantial interest") for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|--|---|
| 1 FEE RECEIVED FROM | NAME AND ADDRESS not applicable |
| 2 FEE RECEIVED BY | NAME OF BUSINESS <input type="checkbox"/> FILER OR FILER'S BUSINESS _____ <input type="checkbox"/> SPOUSE OR SPOUSE'S BUSINESS _____ <input type="checkbox"/> DEPENDENT CHILD _____ OR CHILD'S BUSINESS _____ |
| 3 FEE AMOUNT | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| FEE RECEIVED FROM | NAME AND ADDRESS |
| FEE RECEIVED BY | NAME OF BUSINESS <input type="checkbox"/> FILER OR FILER'S BUSINESS _____ <input type="checkbox"/> SPOUSE OR SPOUSE'S BUSINESS _____ <input type="checkbox"/> DEPENDENT CHILD _____ OR CHILD'S BUSINESS _____ |
| FEE AMOUNT | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
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STOCK**PART 2**

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

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| | | | | | |
|------------------------------------|--|---|---|--|---|
| 1 BUSINESS ENTITY | | NAME | | | |
| | | Bank New York | | | |
| 2 STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| 3 NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| 4 IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | <input type="checkbox"/> \$25,000--OR MORE | |
| BUSINESS ENTITY | | NAME | | | |
| | | BankOne Corp. | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | <input type="checkbox"/> \$25,000--OR MORE | |
| BUSINESS ENTITY | | NAME | | | |
| | | Cisco Systems, Inc. | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | <input type="checkbox"/> \$25,000--OR MORE | |
| BUSINESS ENTITY | | NAME | | | |
| | | General Electric Co. | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | <input type="checkbox"/> \$25,000--OR MORE | |
| BUSINESS ENTITY | | NAME | | | |
| | | Home Depot | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | <input type="checkbox"/> \$25,000--OR MORE | |

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| | | | | | | | |
|------------------------------------|--|---|--|---|---|---|--|
| 1 BUSINESS ENTITY | | NAME | | | | | |
| | | Intel | | | | | |
| 2 STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | | |
| 3 NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | _____ | _____ | | |
| 4 IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| BUSINESS ENTITY | | NAME | | | | | |
| | | IBM | | | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | _____ | _____ | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| BUSINESS ENTITY | | NAME | | | | | |
| | | JP Morgan Chase | | | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | | |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | _____ | _____ | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> NET LOSS | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| BUSINESS ENTITY | | NAME | | | | | |
| | | Johnson & Johnson | | | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | | |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | _____ | _____ | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input type="checkbox"/> NET LOSS | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| BUSINESS ENTITY | | NAME | | | | | |
| | | McDonalds Corp | | | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | | |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | _____ | _____ | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> NET LOSS | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |

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| | | | | | | |
|------------------------------------|--|---|---|---|---|--|
| 1 BUSINESS ENTITY | | NAME | | | | |
| | | Merrill Lynch | | | | |
| 2 STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | |
| 3 NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | | |
| 4 IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | | |
| BUSINESS ENTITY | | NAME | | | | |
| | | Micron | | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | | |
| BUSINESS ENTITY | | NAME | | | | |
| | | Flextronics Intl | | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | | |
| BUSINESS ENTITY | | NAME | | | | |
| | | AOL | | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | | |
| BUSINESS ENTITY | | NAME | | | | |
| | | Alcoa | | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 | |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | | |

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| | | | | | |
|------------------------------------|--|---|--|--|--|
| 1 BUSINESS ENTITY | | NAME American Express | | | |
| 2 STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| 3 NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| 4 IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME American Int'l Group Inc | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME Amgen Inc. | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME Coca-Cola Inc. | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME Walt Disney Co. | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |

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| | | | | | |
|------------------------------------|--|---|---|---|--|
| 1 BUSINESS ENTITY | | NAME | | | |
| | | Duke Energy Group | | | |
| 2 STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| 3 NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| 4 IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME | | | |
| | | Electronic Data Systems | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME | | | |
| | | Exxon Mobil | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME | | | |
| | | Merck & Co | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input checked="" type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME | | | |
| | | Microsoft | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

1-800-325-8506

STOCK**PART 2**

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | | |
|------------------------------------|--|---|---|---|---|
| 1 BUSINESS ENTITY | | NAME | | | |
| | | Pfizer Inc. | | | |
| 2 STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| 3 NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| 4 IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input checked="" type="checkbox"/> NET LOSS | <input type="checkbox"/> \$25,000--OR MORE | | |
| BUSINESS ENTITY | | NAME | | | |
| | | Sun Micro System | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input checked="" type="checkbox"/> NET LOSS | <input type="checkbox"/> \$25,000--OR MORE | | |
| BUSINESS ENTITY | | NAME | | | |
| | | Target | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | <input type="checkbox"/> \$25,000--OR MORE | | |
| BUSINESS ENTITY | | NAME | | | |
| | | Texas Instruments | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input checked="" type="checkbox"/> NET LOSS | <input type="checkbox"/> \$25,000--OR MORE | | |
| BUSINESS ENTITY | | NAME | | | |
| | | TXCO Int'l | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input checked="" type="checkbox"/> NET LOSS | <input type="checkbox"/> \$25,000--OR MORE | | |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission

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STOCK**PART 2**

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | | |
|------------------------------------|--|---|---|--|--|
| 1 BUSINESS ENTITY | | NAME | | | |
| | | Wal-Mart Stores | | | |
| 2 STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| 3 NUMBER OF SHARES | | <input checked="" type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| 4 IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME | | | |
| | | Applied Material | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input checked="" type="checkbox"/> NET GAIN | <input checked="" type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | | <input type="checkbox"/> \$25,000--OR MORE |
| BUSINESS ENTITY | | NAME | | | |
| | | Southwest Airlines | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input checked="" type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | | <input type="checkbox"/> \$25,000--OR MORE |
| BUSINESS ENTITY | | NAME | | | |
| | | American Ford (Managed) | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | | <input type="checkbox"/> \$25,000--OR MORE |
| BUSINESS ENTITY | | NAME | | | |
| | | AXPVP Managed Fund | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD | _____ |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input checked="" type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| | | <input type="checkbox"/> NET LOSS | | | <input type="checkbox"/> \$25,000--OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

STOCK**PART 2**

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | | |
|------------------------------------|--|---|--|--|--|
| 1 BUSINESS ENTITY | | NAME AXPVP CAP Resources (Managed) | | | |
| 2 STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| 3 NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| 4 IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME Merrill Lynch | | | |
| STOCK HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input checked="" type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME | | | |
| STOCK HELD OR ACQUIRED BY | | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME | | | |
| STOCK HELD OR ACQUIRED BY | | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |
| BUSINESS ENTITY | | NAME | | | |
| STOCK HELD OR ACQUIRED BY | | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| NUMBER OF SHARES | | <input type="checkbox"/> LESS THAN 100 | <input type="checkbox"/> 100 TO 499 | <input type="checkbox"/> 500 TO 999 | <input type="checkbox"/> 1,000 TO 4,999 |
| | | <input type="checkbox"/> 5,000 TO 9,999 | <input type="checkbox"/> 10,000 OR MORE | | |
| IF SOLD | | <input type="checkbox"/> NET GAIN | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| | | <input type="checkbox"/> NET LOSS | | | |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BONDS, NOTES, AND OTHER COMMERCIAL PAPER

PART 3

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | |
|--|--|---------------------------------|--|
| ¹ DESCRIPTION OF INSTRUMENT | Not Applicable | | |
| ² HELD OR ACQUIRED BY | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| ³ IF SOLD | <input type="checkbox"/> NET GAIN <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> NET LOSS | | |
| DESCRIPTION OF INSTRUMENT | | | |
| HELD OR ACQUIRED BY | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| IF SOLD | <input type="checkbox"/> NET GAIN <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> NET LOSS | | |
| DESCRIPTION OF INSTRUMENT | | | |
| HELD OR ACQUIRED BY | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| IF SOLD | <input type="checkbox"/> NET GAIN <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE <input type="checkbox"/> NET LOSS | | |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES, AND RENTS

PART 4

List each source of income you, your spouse, or a dependent child received *in excess of \$500* that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | |
|--|---|--|--|
| 1 SOURCE OF INCOME | NAME AND ADDRESS Bank of America PO Box 2518 Houston, Texas (Interest Income) | | |
| 2 RECEIVED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ | | |
| 3 AMOUNT | <input checked="" type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE | | |
| SOURCE OF INCOME | NAME AND ADDRESS Salomon, Smith Barney 388 Greenwich Street New York, NY (Interest Income) | | |
| RECEIVED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ | | |
| AMOUNT | <input checked="" type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE | | |
| SOURCE OF INCOME | NAME AND ADDRESS Salomon, Smith Barney 388 Greenwich Street New York, NY (Interest Income) | | |
| RECEIVED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ | | |
| AMOUNT | <input checked="" type="checkbox"/> \$500--\$4,999 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE | | |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | | | |

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES, AND RENTS

PART 4

List each source of income you, your spouse, or a dependent child received *in excess of \$500* that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | | |
|--|--|--|--|--|--|
| 1 SOURCE OF INCOME | | NAME AND ADDRESS | | | |
| | | Gloria Ashford 7318 Oakmore Drive Dallas, TX 75249 (Rental Income) | | | |
| 2 RECEIVED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| 3 AMOUNT | | <input type="checkbox"/> \$500--\$4,999 | <input checked="" type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| SOURCE OF INCOME | | NAME AND ADDRESS | | | |
| | | Kenneth Medlock 2611 Deep Hill Circle Dallas, TX (Rental Income) | | | |
| RECEIVED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| AMOUNT | | <input type="checkbox"/> \$500--\$4,999 | <input checked="" type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| SOURCE OF INCOME | | NAME AND ADDRESS | | | |
| | | Dallas National Bank Po Box 223809 Dallas, TX 75222 (Interest Income) | | | |
| RECEIVED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| AMOUNT | | <input checked="" type="checkbox"/> \$500--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | | | | | |



PERSONAL NOTES AND LEASE AGREEMENTS

PART 5

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of *more than \$1,000* in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS—INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | |
|--|--|---|--|---|
| 1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | Bank of America | | | |
| 2 LIABILITY OF | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| 3 GUARANTOR | | | | |
| 4 AMOUNT | <input checked="" type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | Wells Fargo (Vehicle Lease) | | | |
| LIABILITY OF | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| GUARANTOR | | | | |
| AMOUNT | <input type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input checked="" type="checkbox"/> \$25,000--OR MORE |
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | Chase Bank of Texas | | | |
| LIABILITY OF | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| GUARANTOR | | | | |
| AMOUNT | <input type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input checked="" type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | | | | |

PERSONAL NOTES AND LEASE AGREEMENTS

PART 5

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of *more than \$1,000* in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | |
|---|--|---|--|---|
| 1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | Capitol One Bank (Credit Card) | | | |
| 2 LIABILITY OF | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| 3 GUARANTOR | | | | |
| 4 AMOUNT | <input checked="" type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | CitiBank | | | |
| LIABILITY OF | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| GUARANTOR | | | | |
| AMOUNT | <input checked="" type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | Wells Fargo (Mortgage) | | | |
| LIABILITY OF | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| GUARANTOR | | | | |
| AMOUNT | <input type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 | <input checked="" type="checkbox"/> \$25,000--OR MORE |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | | | | |

PERSONAL NOTES AND LEASE AGREEMENTS

PART 5

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of *more than \$1,000* in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | |
|--|---|---|--|
| 1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | Principal Mortgage | | |
| 2 LIABILITY OF | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| 3 GUARANTOR | | | |
| 4 AMOUNT | <input type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| <input checked="" type="checkbox"/> \$25,000--OR MORE | | | |
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | | | |
| LIABILITY OF | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| GUARANTOR | | | |
| AMOUNT | <input type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| <input type="checkbox"/> \$25,000--OR MORE | | | |
| PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT | | | |
| LIABILITY OF | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| GUARANTOR | | | |
| AMOUNT | <input type="checkbox"/> \$1,000--\$4,999 | <input type="checkbox"/> \$5,000--\$9,999 | <input type="checkbox"/> \$10,000--\$24,999 |
| <input type="checkbox"/> \$25,000--OR MORE | | | |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | | | |

INTERESTS IN REAL PROPERTY**PART 6A**

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|--|---|
| 1 HELD OR ACQUIRED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| 2 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1- Dallas County |
| 3 STREET ADDRESS <input type="checkbox"/> NOT APPLICABLE | STREET ADDRESS INCLUDING CITY, COUNTY, AND STATE 1305 Green Hills Court Duncanville, TX |
| 4 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST) | |
| 5 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| HELD OR ACQUIRED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 - Dallas County |
| STREET ADDRESS <input type="checkbox"/> NOT APPLICABLE | STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 9204 Cutleaf Dallas, TX 75249 |
| NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST) | |
| IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN REAL PROPERTY**PART 6A**

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | |
|--|--|---|---------------------------------|--|
| 1 HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| 2 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES | | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1- Dallas County | | |
| 3 STREET ADDRESS <input type="checkbox"/> NOT APPLICABLE | | STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 2204 Bell Street Dallas, TX | | |
| 4 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST) | | George Brice Hiers | | |
| 5 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE | | |
| HELD OR ACQUIRED BY | | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES | | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1 - Dallas County | | |
| STREET ADDRESS <input type="checkbox"/> NOT APPLICABLE | | STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 7318 Oakmore Dr. Dallas, TX 75249 | | |
| NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST) | | | | |
| IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE | | |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | | | | |

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

1-800-325-8506

INTERESTS IN REAL PROPERTY**PART 6A**

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|---|---|
| 1 HELD OR ACQUIRED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| 2 DESCRIPTION <input checked="" type="checkbox"/> LOTS <input type="checkbox"/> ACRES | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1- Dallas County |
| 3 STREET ADDRESS <input type="checkbox"/> NOT APPLICABLE | STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 511 Eads Dallas, TX |
| 4 NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST) | |
| 5 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| HELD OR ACQUIRED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| DESCRIPTION <input type="checkbox"/> LOTS <input checked="" type="checkbox"/> ACRES | NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 5 acres - Dallas County |
| STREET ADDRESS <input type="checkbox"/> NOT APPLICABLE | STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE 1537 Pleasant Run Road DeSoto, TX |
| NAMES OF PERSONS RETAINING AN INTEREST <input type="checkbox"/> NOT APPLICABLE (SEVERED MINERAL INTEREST) | |
| IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

INTERESTS IN BUSINESS ENTITIES**PART 6B**

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | |
|---|---|
| 1 HELD OR ACQUIRED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| 2 DESCRIPTION | <small>NAME AND ADDRESS</small> West & Gooden, P.C. f/k/a Robinson, West & Gooden 400 North St. Paul, Suite 1140 Dallas, TX 75202 |
| 3 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| HELD OR ACQUIRED BY | <input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| DESCRIPTION | <small>NAME AND ADDRESS</small> Reach Media, Inc. 13760 Noel Dallas, TX 75240 |
| IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| HELD OR ACQUIRED BY | <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ |
| DESCRIPTION | <small>NAME AND ADDRESS</small> |
| IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

GIFTS**PART 7**

Identify any person or organization that has given a gift *worth more than \$250* to you, your spouse, or a dependent child, and describe the gift. Do not include: 1) expenditures required to be reported by a person required to be registered as a lobbyist under Government Code Chapter 305, 2) political contributions reported as required by law, or 3) gifts given by a person related to the recipient within the second degree by consanguinity or affinity. For more information, see FORM PFS-INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | |
|--|------------------------------------|---------------------------------|--|
| 1 DONOR | NAME AND ADDRESS Not Applicable | | |
| 2 RECIPIENT | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| 3 DESCRIPTION OF GIFT | | | |
| DONOR | NAME AND ADDRESS | | |
| RECIPIENT | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| DESCRIPTION OF GIFT | | | |
| DONOR | NAME AND ADDRESS | | |
| RECIPIENT | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| DESCRIPTION OF GIFT | | | |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | | | |

TRUST INCOME**PART 8**

Identify each source of income received by you, your spouse, or a dependent child as beneficiary of a trust and indicate the category of the amount of income received. Also identify each asset of the trust from which the beneficiary received *more than \$500* in income, if the identity of the asset is known. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | | |
|---|--|---|---------------------------------|--|--|
| 1 SOURCE | | NAME OF TRUST | | | |
| | | Not Applicable | | | |
| 2 BENEFICIARY | | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| 3 INCOME | | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE | | | |
| 4 ASSETS FROM WHICH OVER \$500 WAS RECEIVED | | | | | |
| <input type="checkbox"/> UNKNOWN | | | | | |
| SOURCE | | NAME OF TRUST | | | |
| BENEFICIARY | | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| INCOME | | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE | | | |
| ASSETS FROM WHICH OVER \$500 WAS RECEIVED | | | | | |
| <input type="checkbox"/> UNKNOWN | | | | | |
| SOURCE | | NAME OF TRUST | | | |
| BENEFICIARY | | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ | |
| INCOME | | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE | | | |
| ASSETS FROM WHICH OVER \$500 WAS RECEIVED | | | | | |
| <input type="checkbox"/> UNKNOWN | | | | | |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY



Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

(512) 463-5800

1-800-325-8506

CORPORATE & PARTNERSHIP ASSETS

PART 9A

Describe all assets of each corporation or partnership in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | |
|------------------------------|--|---|--|--|
| 1 CORPORATION OR PARTNERSHIP | | NAME AND ADDRESS Not Applicable | | |
| 2 HELD, ACQUIRED, OR SOLD BY | | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| 3 ASSETS | | DESCRIPTION | CATEGORY | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

CORPORATE & PARTNERSHIP LIABILITIES

PART 9B

Describe all liabilities of each corporation or partnership in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | | |
|------------------------------|--|---|--|--|
| 1 CORPORATION OR PARTNERSHIP | | NAME AND ADDRESS Not Applicable | | |
| 2 HELD, ACQUIRED, OR SOLD BY | | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| 3 LIABILITIES | | DESCRIPTION | CATEGORY | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |
| | | <input type="checkbox"/> LESS THAN \$5,000 | <input type="checkbox"/> \$5,000--\$9,999 | |
| | | <input type="checkbox"/> \$10,000--\$24,999 | <input type="checkbox"/> \$25,000--OR MORE | |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BOARDS AND EXECUTIVE POSITIONS**PART 10**

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

| | | | |
|-------------------------------|---|---------------------------------|--|
| ¹ ORGANIZATION | West & Gooden, P.C. p/k/a Robinson, West & Gooden | | |
| ² POSITION HELD | President | | |
| ³ POSITION HELD BY | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| ORGANIZATION | Tom Joyner Foundation, Inc. | | |
| POSITION HELD | Secretary | | |
| POSITION HELD BY | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| ORGANIZATION | Reach Media, Inc. | | |
| POSITION HELD | Secretary | | |
| POSITION HELD BY | <input checked="" type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| ORGANIZATION | | | |
| POSITION HELD | | | |
| POSITION HELD BY | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |
| ORGANIZATION | | | |
| POSITION HELD | | | |
| POSITION HELD BY | <input type="checkbox"/> FILER | <input type="checkbox"/> SPOUSE | <input type="checkbox"/> DEPENDENT CHILD _____ |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

PART 11

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under Penal Code section 36.07(b), in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (Government Code Chapter 305). For more information, see FORM PFS--INSTRUCTION GUIDE.

| | |
|---|---|
| ¹ PROVIDER | NAME AND ADDRESS The Graydon Group, LLC 1001 Congress Avenue, Suite 400 Austin, TX 78701 |
| ² AMOUNT | \$2,310.19 |
| PROVIDER | NAME AND ADDRESS |
| AMOUNT | |
| PROVIDER | NAME AND ADDRESS |
| AMOUNT | |
| PROVIDER | NAME AND ADDRESS |
| AMOUNT | |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | |

**INTEREST IN BUSINESS
IN COMMON WITH LOBBYIST****PART 12**

Identify each partnership, joint venture, or other business association, other than a publicly-held corporation, in which you and a person registered as a lobbyist under Government Code Chapter 305 both have an interest. For more information, see FORM PFS--INSTRUCTION GUIDE.

| | |
|--|------------------------------------|
| 1 BUSINESS ENTITY | NAME AND ADDRESS Not Applicable |
| BUSINESS ENTITY | NAME AND ADDRESS |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | |

FEES RECEIVED FOR SERVICES RENDERED TO A LOBBYIST OR LOBBYIST'S EMPLOYER

PART 13

Report any fee you received for providing services to or on behalf of a person required to be registered as a lobbyist under Government Code Chapter 305, or for providing services to or on behalf of a person you actually know directly compensates or reimburses a person required to be registered as a lobbyist. Report the name of each person or entity for which the services were provided, and indicate the category of the amount of each fee. For more information, see FORM PFS-INSTRUCTION GUIDE.

| | |
|--|---|
| 1 PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED | Not Applicable |
| 2 FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| PERSON OR ENTITY FOR WHOM SERVICES WERE PROVIDED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | |

REPRESENTATION BY LEGISLATOR BEFORE STATE AGENCY

PART 14

This section applies only to members of the Texas Legislature. A member of the Texas Legislature who represents a person for compensation before a state agency in the executive branch must provide the name of the agency, the name of the person represented, and the category of the amount of the fee received for the representation. For more information, see FORM PFS--INSTRUCTION GUIDE.

| | |
|---------------------------------|--|
| ¹ STATE AGENCY | Texas Department of Health |
| ² PERSON REPRESENTED | North Park Medical Group - Dr. Douglas Karpin |
| ³ FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input checked="" type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| STATE AGENCY | |
| PERSON REPRESENTED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| STATE AGENCY | |
| PERSON REPRESENTED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| STATE AGENCY | |
| PERSON REPRESENTED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |
| STATE AGENCY | |
| PERSON REPRESENTED | |
| FEE CATEGORY | <input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000--\$9,999 <input type="checkbox"/> \$10,000--\$24,999 <input type="checkbox"/> \$25,000--OR MORE |

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BENEFITS DERIVED FROM FUNCTIONS HONORING PUBLIC SERVANT

PART 15

Penal Code Section 36.10 provides that the gift prohibitions set out in Penal Code Section 36.08 do not apply to a benefit derived from a function in honor or appreciation of a public servant required to file a statement under Government Code Chapter 572 or Election Code Title 15 if the benefit and the source of any benefit over \$50 in value are: 1) reported in the statement and 2) the benefit is used solely to defray expenses that accrue in the performance of duties or activities in connection with the office which are nonreimbursable by the state or a political subdivision. If such a benefit is received and is not reported by the public servant under Election Code Title 15, the benefit is reportable here. For more information, see FORM PFS--INSTRUCTION GUIDE.

| | |
|--|--|
| ¹ SOURCE OF BENEFIT | NAME AND ADDRESS Not Applicable |
| ² BENEFIT | |
| SOURCE OF BENEFIT | NAME AND ADDRESS |
| BENEFIT | |
| SOURCE OF BENEFIT | NAME AND ADDRESS |
| BENEFIT | |
| SOURCE OF BENEFIT | NAME AND ADDRESS |
| BENEFIT | |
| COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY | |

Texas Ethics Commission

P.O. Box 12070

Austin, Texas 78711-2070

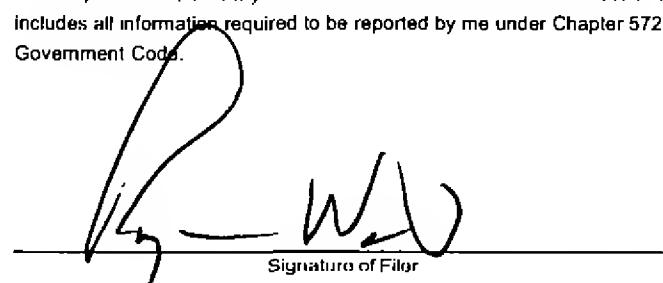
(512) 463-5800

1-800-325-8506

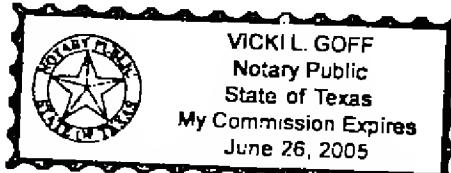
PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, that my financial statement is true and correct and includes all information required to be reported by me under Chapter 572, Government Code.



Signature of Filer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Royce West, this the 15 day of July, 20 03, to certify which, witness my hand and seal of office.


Signature of officer administering oathVICKI L. GOFF
Print name of officer administering oathNOTARY PUBLIC TRAVIS
Title of officer administering oath COUNTY

FILER:

Royce WestACCT#: 20990

TEXAS ETHICS COMMISSION
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

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| <input type="checkbox"/> First Class Mail (USPS) | _____ | postmark date |
| <input checked="" type="checkbox"/> Registered/Certified Mail | <u>7-15-03</u> | postmark date |
| <input type="checkbox"/> No Postmark | _____ | date of receipt |
| <input type="checkbox"/> Postmark Illegible | _____ | date of receipt |
| <input type="checkbox"/> Interagency Mail | _____ | date of receipt |
| <input type="checkbox"/> Contract Carrier | _____ | Name of Carrier |
| | _____ | date of receipt |
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| Prepared by: <u>Sue Edwards</u> | | <u>7-18-03</u> date |